



Yes We Can! Success is Our Only Option
2009 Public Law 102-477 National Conference
Florida Hotel and Conference Center, Orlando, Florida • April 6-10, 2009

EXHIBIT APPLICATION AND AGREEMENT

Contact Person:		Title/Position:	
Tribe/Organization/Company:			
Mailing Address:		Daytime Phone: () Ext.	
City:	State:	Postal Code:	Fax No.: ()
Email Address:		Website:	
1 st Badge Name/Title		2 nd Badge Name/Title	

TERMS OF AGREEMENT

This application/agreement for exhibit space was made and entered into by and between the 477 Conference and Exhibitor. Application for space and its acceptance constitutes a contract to use the space assigned. The 477 Conference retains the right to assign and/or change exhibit locations due to unavoidable problems of the parties involved. The 477 Conference reserves the right to refuse space to applicants whose exhibit materials are deemed to be not within the best interests of the 477 Conference.

The Exhibitor indemnifies and agrees to hold harmless the 477 Conference and the Hotel, their officers, directors, employees, and representatives, from and against any actions, losses, costs, damages, claims, and expenses including attorney's fees, arising from any damage to property or bodily injury to Exhibitor, his agents, representatives, employees by reason of the Exhibitor's occupancy or use of the exhibition facilities.

In accordance with the forgoing agreement for the 2009 PL 102-477 Conference, to be held April 6-10, 2009, the undersigned makes application for exhibit space and encloses the full fee for each space requested.

Signature: _____

Date: _____

Exhibit: 8-ft. skirted table/chairs. Limited electricity is available on a first-come, first-served basis. Meals are NOT included in the exhibit fee; however, meal tickets may be available onsite.

EXHIBIT RATES (Please indicate exhibit type):

- ☐ 477 PROGRAM\$150.00
☐ NATIVE ARTS & CRAFTS.....\$150.00
plus donation of item for conference drawing
☐ NATIVE NON-PROFIT ORGANIZATION\$150.00
☐ INDIAN TRIBAL ENTERPRISE\$300.00
☐ EDUCATIONAL INSTITUTION\$300.00
☐ GOVERNMENT AGENCY.....\$600.00
☐ PRIVATE BUSINESS.....\$600.00

I, hereby, apply for the following number of spaces and agree to pay the appropriate fee.

No. of Spaces _____

x \$ _____ (fee)

= \$ _____

☐ Electricity Requested

☐ Check enclosed -- make payable to: **California Indian Manpower Consortium, Inc.**

☐ VISA/MasterCard Only

Card No.: _____ Exp. _____

Cardholder's Name (printed): _____

Card Billing Address: _____

INCLUDING ZIP CODE

Cardholder's Signature: _____

Mail form and payment to: California Indian Manpower Consortium, Inc.

ATTN: 477 Conference

738 N Market Blvd, Sacramento, CA 95834

For further information, call: (916) 920-0285; (800) 748-5259 – TTY; (916) 641-6338 - fax

FOR CONFERENCE USE ONLY

PAID BY: ☐ CK. AMT.: \$ _____ CK. NO.: # _____ ☐ CASH \$ _____

☐ PO AMT.: \$ _____ PO NO.: # _____ ☐ OTHER _____

☐ CREDIT CARD AMT.: \$ _____ AUTHORIZATION CODE: _____

TOTAL AMOUNT REC'D: \$ _____ REC'D BY _____ DATE: _____